Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

FAIR POLITICAL PRACTIC**COVER PAGE**ON

11 JUN 14 PM 2: 44

(EB)

NAME OF FIL	ER (LAST)	(FIRST)	(MIDDLE)
Gaines		Beth	Burkhard
1. Office	e, Agency, or Court		
Agency	Name		
Califo	ornia State Assembly		
Division	n, Board, Department, District, if applicable	Your Position	
Distri	ct 4	Assembly Member	
► 1f filir	ng for multiple positions, list below or on an attachment.		
Agency	:	Position:	
2. Juris	diction of Office (Check at least one box)		
State	e	☐ Judge (Statewide Jurisdiction)	
Muli	li-County	County of	
☐ City	of		
3. Type	of Statement (Check at least one box)		<u></u>
☐ A n 201	nual: The period covered is January 1, 2010, through December 0.	31, Leaving Office: Date Left/ (Check one)	
	The period covered is/, through December 3 2010.	1, O The period covered is January 1, 2 leaving office.	2010, through the date of
⊠ Ass	suming Office: Date 5 / 12 / 11	 The period covered is	/, through the date
Car	ndidate: Election Year Office sought, if o	lifferent than Part 1:	
4. Sche	dule Summary		
	<u> </u>	- Total number of pages including this cover p	age:
=	nedule A-1 - Investments - schedule attached	Schedule C - Income, Loans, & Business P Schedule D - Income - Gifts - schedule att	
	edule B - Real Property - schedule attached	Schedule E - Income - Gifts - Travel Paym	
•	-or- None - No reportable inte		
		resis on any schedule	
herein a	nd in any attached schedules is true and complete. I acknowledge	a thic is a	
	under penalty of perjury under the laws of the State of California		
Date Sig	med	Signature	

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	
Beth Gaines	

•	NAME OF BUSINESS ENTITY)	NAME OF BUSINESS ENTITY
•	BerkShire Hathaway		Dodge and Cox Stock Fund
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY		GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	Banking/Financing/Food/Carpet/etc.		Mutual Fund
	FAIR MARKET VALUE	1	FAIR MARKET VALUE
	\$2,000 - \$10,000	1	X \$2,000 - \$10,000
	\$100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT		NATURE OF INVESTMENT
	Stock Other		Stock Other
	(Describe) Partnership O Income Received of \$0 - \$499		(Describe)
	Income Received of \$500 or More (Report on Schedule C)		Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
<u></u>	NAME OF BUSINESS ENTITY	•	NAME OF BUSINESS ENTITY
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY]	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	FAIR MARKET VALUE	1	FAIR MARKET VALUE
	\$2,000 - \$10,000 \$10,001 - \$100,000	1	\$2,000 - \$10,000 \$10,001 - \$100,000
	S100,001 - \$1,000,000 Over \$1,000,000		S100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT		NATURE OF INVESTMENT
	Stock Other	1	Stock Other (Describe)
	(Describe) Partnership (Income Received of \$0 - \$499	1	Partnership O Income Received of \$0 - \$499
	O Income Received of \$500 or More (Report on Schedule C)		O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	1	l	
•	//_10//10 ACQUIRED DISPOSED		
		┞	
•	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENTITY
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	1	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	İ		
	FAIR MARKET VALUE		FAIR MARKET VALUE
	\$2,000 - \$10,000 \$10,001 - \$100,000		\$2,000 - \$10,000 \$10,001 - \$100,000
,	\$100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT		NATURE OF INVESTMENT
-	Stock Other(Describe)		Stock Other (Describe)
ļ	Partnership O Income Received of \$0 - \$499		Partnership O Income Received of \$0 - \$499
•	O Income Received of \$500 or More (Report on Schedule C)		O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
_	<u>, , 10 , , 10</u>		
-	ACQUIRED DISPOSED		ACQUIRED DISPOSED
ص: ام:	mments:		

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Name

Beth Gaines

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Gaines Ranch	Pointwest Insurance Associates
Name P.O. Box 151, Butte City, CA 95920 Address (Business Address Acceptable) Check one	Name 865 Howe Avenue, Sacramento, CA 95825 Address (Business Address Acceptable) Check one
☐ Trust, go to 2 ☑ Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY Farming	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 10,001 - \$100,000 100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INVESTMENT Sole Proprietorship Partnership Other YOUR BUSINESS POSITION Spouse is partner.	NATURE OF INVESTMENT Sole Proprietorship Partnership Corporation YOUR BUSINESS POSITION Spouse is Vice President
➤ 2, IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) S0 - \$499 \$\implies \$10,001 - \$100,000\$	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) SO - \$499 \$10,001 - \$100,000
S500 - \$1,000 OVER \$100,000	S500 - \$1,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) Diamond Walnut Foods	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) Rod Read & Sons, Inc; KLS Air Express, Inc.
Sunsweet	
Julisweet	Sunset View Cemetery Association
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box: ☐ INVESTMENT ☐ REAL PROPERTY	Check one box: NVESTMENT REAL PROPERTY
See attached	NVESTMENT REAL PROPERTY
Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property	Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 10,001 - \$100,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 10,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Yrs. remaining Sother Family	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2010/2011) Sch. A-2

Edward M. "Ted" Gaines

Additional Information for the Schedule A-2 2011 2012

GAINES RANCH ITEM #4

Income:

Diamond Walnut 395 Mitchell Road Modesto, CA

Sunsweet Growers 901 N. Walton Ave. Yuba City, CA

Loan:

Harry T. and Mary Holgerson Attention: Ernest Mertini The Cannery Business Park 3301 C Street #100 Sacramento, CA 956816

ITEM #4 APN

013-311-001-9 013-311-002-9 013-312-002-9 013-312-003-0 013-312-004-9 013-314-001-9 013-314-007-0

013-312-001-9 ··· 013-313-011-9 013-313-009-9 013-312-007-9 013-312-009-9 012-120-017-000

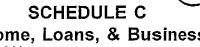
SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	
Name	
Beth Gaines	

	► 1. INCOME RECEIVED	
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME	
Pointwest Insurance Associates	Pointwest Insurance Associates	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
865 Howe Avenue, Sacramento, CA 95825	865 Howe Avenue, Sacramento, CA 95825	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
Insurance	Insurance	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION	
Vice President	Marketing Consultant	
GROSS INCOME RECEIVED	GROSS INCOME.RECEIVED	
\$500 - \$1,000 \$1,001 - \$10,000	☐ \$500 - \$1,000 区 \$1,001 - \$10,000	
☐ \$10,001 - \$100,000 🔀 OVER \$100,000	S10,001 - \$100,000 DVER \$100,000	
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
Salary Spouse's or registered domestic partner's income	Spouse's or registered domestic partner's income	
Loan repayment Partnership	Loan repayment Partnership	
Sale of	Sale of	
Sale of (Property, car, boat, etc.)	Sale of(Property, car, boat, etc.)	
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or a	nore
П ач		
Other(Describe)	Other(Describe)	
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	OD	
* You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to you not in a lender's regular course of business must be	in the lender's regular course of business on terms our official status. Personal loans and loans receiv	-
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)	
	%	<u>_</u>
ADDRESS (Business Address Acceptable)		
ADDRESS (Business Address Acceptable)	SECURITY FOR LOAN	
ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER		
	SECURITY FOR LOAN None Personal residence Real Property	
	SECURITY FOR LOAN None Personal residence	
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN None Personal residence Real Property Street address	
BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD	SECURITY FOR LOAN None Personal residence Real Property Street address City	
BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000	SECURITY FOR LOAN None Personal residence Real Property Street address	
BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000	SECURITY FOR LOAN None Personal residence Real Property Street address City Guarantor	
BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000	SECURITY FOR LOAN None Personal residence Real Property Street address City	
BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000	SECURITY FOR LOAN None Personal residence Real Property Street address City Other	
BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000	SECURITY FOR LOAN None Personal residence Real Property Street address City Other	

BY:



POLITICINCOME, Loans, & Business ES COHMISSION Positions

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

(Other than Gifts and Travel Payments)

1. INCOME RECEIVED	► 1. INCOME RECEIVED	
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME	
Pointwest Insurance Association	Gaines Ranch	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
865 Howe Avenue, Sacramento, CA 95825	P.O. Box 151, Butte City, CA 95920	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
Insurance	Farming	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION	
Marketing Consultant	Partner	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED	
\$500 - \$1,000 X \$1,001 - \$10,000	\$500 - \$1,000 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
S10,001 - \$100,000 OVER \$100,000	X \$10,001 - \$100,000 ☐ OVER \$100,000	
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
	Salary Spouse's or registered domestic partner's income	
Loan repayment Partnership	☐ Loan repayment ☐ Partnership	
Sale of	Sale of Parcels referenced in Amendment A-2	
(Property, car, boat, etc.)	(Property, car, boat, etc.)	
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more	
	·	
Other (Describe)	Other (Describe)	
Comments:		
► 2. LOAN RECEIVED		
You are not required to report loans from commercial lendi retail installment or credit card transaction, made in the len members of the public without regard to your official status regular course of business must be disclosed as follows:	nder's regular course of business on terms available to	
NAME OF LENDER	INTEREST RATE TERM (Months/Years)	
ADDDEOG (O	% . None	
ADDRESS (Business Address Acceptable) .	SECURITY FOR LOAN	
DUCINESS ACTIVITY IF ANY OF LENDED	None Personal residence	
BUSINESS ACTIVITY, IF ANY, OF LENDER		
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address	
_		
\$500 - \$1,000	City	
S1,001 - \$10,000	Guarantor	
S10,001 - \$100,000		
OVER \$100,000	Other (Describe)	
Verification		
Print Name Beth Gaines Office, As	gency or Court Assembly, State of California	
Statement Type 🔀 2010/2011 Annual 🔲 Annual 🔀 Assur		
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.		
I certify under penalty of perjury under the laws of the State of Cali	ifornia that the (d)(5)	
7/19/11	Signatura	
Date Signed (month, day, year)	Signature	



SCHEDULE A-2

of Business Entities/Trusts (Ownership Interest is 10% or Greater)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

► 1. BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE
Gaines Ranch	BUSINESS ENTITY OR TRUST Check one box:
Name	INVESTMENT REAL PROPERTY
P.O. Box 151, Butte City, CA 95920	,
Address (Business Address Acceptable)	
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	Description of Business Activity or City or Other Precise Location of Real Property
\$10,001 - \$100,000//	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
	\$2,000 - \$10,000 \$10,001 - \$100,000
CVer \$1,500,000	\$10,001 - \$100,000
NATURE OF INVESTMENT	Over \$1,000,000
Sole Proprietorship X Partnership Other	NATURE OF INTEREST
YOUR BUSINESS POSITION	Partnership
	Leasehold X Other Family
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA	Leasehold Yrs. remaining Other
SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	Check box if additional schedules reporting investments or real property
☐ \$0 - \$499 ☐ \$10,001 - \$100,000	are attached
☐ \$500 - \$1,000 ☐ OVER \$100,000 ★ \$1,001 - \$10,000	
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	
,	
•	
Comments:	Laboration and the second seco
	•
W-JG-AK	
Verification	
Reint Name Beth Gaines	
Fine Name	
Office, Agency or Court Assembly, State of California	Manager - Alberton
Statement Type 🗵 2010/2011 Annual 🗌 Annual 🗵 As	ssuming
I have used all reasonable diligence in preparing this statement. I have no contained herein and in any attached schedules is true and complete.	eviewed this statement and to the best of my knowledge the information
·	
I certify under penalty of periury under the laws of the State of the	Camornia roat mortoronna is true and correct.

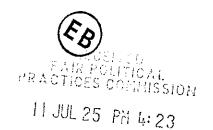
Signature

7/19/11

(month, day, year)

Date Signed _

AMENDMENT TO SCHEDULE A-2



BETH GAINES

Additional information for the Schedule A-2

2010-2011

Gaines Ranch ITEM #4

Income:

Diamond Walnut

395 Mitchell Road Modesto, CA

Sunsweet Growers 901 N. Walton Ave.

Yuba City, CA

!TEM #4

APN# 013-311-001-9

013-311-002-9 013-312-002-9 013-312-003-0 013-312-004-9 013-313-001-9 013-314-001-9 013-314-007-9

013-312-001-9 013-314-005-9 012-120-017-000

Parcels sold in reference to Schedule C

013-313-011-9 013-313-009-9 013-312-007-9 013-312-009-9